

021904

15992 U.S. PTO

PTO/SB/05 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL  (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No.	14914US02
		First Inventor	Bindu Rama Rao
		Title	ELECTRONIC DEVICE NETWORK HAVING GRACEFUL DENIAL OF SERVICE
		Express Mail Label No.	EV 331533895 US

  

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		
3. <input checked="" type="checkbox"/> Specification [Total Pages <u>31</u> ] (preferred arrangement set forth below) -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies		
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>4</u> ]	<b>ACCOMPANYING APPLICATION PARTS</b>		
5. Oath or Declaration [Total Sheets <u>      </u> ] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	9. <input type="checkbox"/> Assignment Papers (cover sheet & documents(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of (when there is an assignee) Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b) (2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: .....		
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: .....			
Prior application information: Examiner: _____ Art Unit: _____			
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
<b>19. CORRESPONDENCE ADDRESS</b>			
<input checked="" type="checkbox"/> Customer Number: <u>23446</u> OR <input type="checkbox"/> Correspondence address below			
Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	
Name (Print/type)	Registration No. (Attorney/Agent)	51,486	
Signature		Date	February 19, 2004

021904

10782083



15992 U.S. PTO

PTO/SB/17 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>FEE TRANSMITTAL</b> <b>for FY 2004</b>  Patent Fees are subject to annual revision.		<b>Complete if Known</b>	
		Application Number	Unassigned
		Filing Date	Herewith
		First Named Inventor	Bindu Rama Rao
		Examiner Name	Unassigned
		Group Art Unit	Unassigned
TOTAL AMOUNT OF PAYMENT	(\$) <b>644.00</b>	Attorney Docket No.	14914US02

<b>METHOD OF PAYMENT</b>		<b>FEE CALCULATION (continued)</b>																																											
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:  Deposit Account Number: <b>13-0017</b> Deposit Account Name: <b>McAndrews Held &amp; Malloy</b> <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<b>3. ADDITIONAL FEES</b>																																											
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other																																													
<b>FEE CALCULATION</b>																																													
<b>1. BASIC FILING FEE</b>																																													
<table border="1"><thead><tr><th>Large Entity Fee Code</th><th>Large Entity Fee (\$)</th><th>Small Entity Fee Code</th><th>Small Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td><b>385</b></td></tr><tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td><b>0</b></td></tr><tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td><b>0</b></td></tr><tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td><b>0</b></td></tr><tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td><b>0</b></td></tr><tr><td colspan="5"><b>SUBTOTAL (1)</b></td><td><b>(\$)<b>385.00</b></b></td></tr></tbody></table>		Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid	1001	770	2001	385	Utility filing fee	<b>385</b>	1002	340	2002	170	Design filing fee	<b>0</b>	1003	530	2003	265	Plant filing fee	<b>0</b>	1004	770	2004	385	Reissue filing fee	<b>0</b>	1005	160	2005	80	Provisional filing fee	<b>0</b>	<b>SUBTOTAL (1)</b>					<b>(\$)<b>385.00</b></b>		
Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid																																								
1001	770	2001	385	Utility filing fee	<b>385</b>																																								
1002	340	2002	170	Design filing fee	<b>0</b>																																								
1003	530	2003	265	Plant filing fee	<b>0</b>																																								
1004	770	2004	385	Reissue filing fee	<b>0</b>																																								
1005	160	2005	80	Provisional filing fee	<b>0</b>																																								
<b>SUBTOTAL (1)</b>					<b>(\$)<b>385.00</b></b>																																								
<b>2. EXTRA CLAIM FEES</b>																																													
<table border="1"><thead><tr><th>Total Claims</th><th>Extra Claims</th><th>Fee from below</th><th>Fee Paid</th></tr></thead><tbody><tr><td>44 - 20** =</td><td>24 x</td><td>8 =</td><td><b>216.00</b></td></tr><tr><td>Independent Claims 4 - 3** =</td><td>1 x</td><td>43 =</td><td><b>43</b></td></tr><tr><td>Multiple Dependent</td><td></td><td>0 =</td><td><b>0</b></td></tr></tbody></table>		Total Claims	Extra Claims	Fee from below	Fee Paid	44 - 20** =	24 x	8 =	<b>216.00</b>	Independent Claims 4 - 3** =	1 x	43 =	<b>43</b>	Multiple Dependent		0 =	<b>0</b>																												
Total Claims	Extra Claims	Fee from below	Fee Paid																																										
44 - 20** =	24 x	8 =	<b>216.00</b>																																										
Independent Claims 4 - 3** =	1 x	43 =	<b>43</b>																																										
Multiple Dependent		0 =	<b>0</b>																																										
<table border="1"><thead><tr><th>Large Entity Fee Code</th><th>Large Entity Fee (\$)</th><th>Small Entity Fee Code</th><th>Small Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr><tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>**Reissue independent claims over original patent</td><td></td></tr><tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>**Reissue claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="5"><b>SUBTOTAL (2)</b></td><td><b>(\$)<b>259.00</b></b></td></tr></tbody></table>		Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid	1202	18	2202	9	Claims in excess of 20		1201	86	2201	43	Independent claims in excess of 3		1203	290	2203	145	Multiple dependent claim, if not paid		1204	86	2204	43	**Reissue independent claims over original patent		1205	18	2205	9	**Reissue claims in excess of 20 and over original patent		<b>SUBTOTAL (2)</b>					<b>(\$)<b>259.00</b></b>		
Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid																																								
1202	18	2202	9	Claims in excess of 20																																									
1201	86	2201	43	Independent claims in excess of 3																																									
1203	290	2203	145	Multiple dependent claim, if not paid																																									
1204	86	2204	43	**Reissue independent claims over original patent																																									
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent																																									
<b>SUBTOTAL (2)</b>					<b>(\$)<b>259.00</b></b>																																								
**or number previously paid, if greater; For Reissues, see above		*Reduced by Basic Filing Fee Paid																																											
		<b>SUBTOTAL (3)</b> (\$) <b>0.00</b>																																											

<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>			
Name (Print/Type)	Kevin E. Borg	Registration No. (Attorney or Agent)	51,486	Telephone	312-775-8000
Signature		Date	February 19, 2004		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.